Form **8872** (November 2002)

Political Organization Report of Contributions and Expenditures

Department of the Treasury Internal Revenue Service

► See separate instructions.

OMB No. 1545-1696

A For the period beginning 10/01/2008 and	d ending 12/31/2008	
B Check applicable box: ✓ Initial report — Change	of address Amended report	✓ Final report
1 Name of organization Heartland PAC		Employer identification number 20 - 2670155
2 Mailing address (P.O. box or number, street, and room or suite 2813 Virginia Place	e number)	
City or town, state, and ZIP code Des Moines, IA 50321		
3 E-mail address of organization: chc02@mchsi.com		4 Date organization was formed: 04/29/2005
5a Name of custodian of records Theresa Kehoe	5b Custodian's address 2813 Virginia Place Des Moines, IA 50321	
6a Name of contact person Theresa Kehoe	6b Contact person's addres 2813 Virginia Place Des Moines, IA 50321	ss
7 Business address of organization (if different from mailing add 2813 Virginia Place City or town, state, and ZIP code Des Moines, IA 50321	ness snown above). Pulliber, street,	and room of suite number
8 Type of report (check only one box)		
 First quarterly report (due by April 15) Second quarterly report (due by July 15) Third quarterly report (due by October 15) ✓ Year-end report (due by January 31) Mid-year report (Non-election year only-due by July 31) 	 Monthly report for the month of: (due by the 20th day following the month shown above, except the December report, which is due by January 31) Pre-election report (due by the 12th or 15th day before the election) (1) Type of election: (2) Date of election: (3) For the state of: Post-general election report (due by the 30th day after general election) (1) Date of election: (2) For the state of: 	
9 Total amount of reported contributions (total from all attache		
10 Total amount of reported expenditures (total from all attache Under penalties of perjury, I declare that I have exam		ing schedules and statements, and to the best of my knowledge
and belief, it is true, correct, and complete. Theresa Kehoe Sign Here Signature of authorized official		01/16/2009

Schedule A Itemized Contributions Schedule A

Form 8872 (11-2002)		
Schedule B Itemized Expenditures		Schedule
Recipient's name, mailing address and ZIP code Bankers Trust 453 7th Des Moines, IA 50309	Name of recipient's employer NA Recipients's occupation NA	Amount of Expenditure \$ 11 Date of expenditure 10/02/2008
Purpose of expenditure bank service charges		
Recipient's name, mailing address and ZIP code American Express PO Box 53852 Phoenix, AZ 85072 Purpose of expenditure	Name of recipient's employer NA Recipients's occupation NA	Amount of Expenditure \$ 6 Date of expenditure 10/02/2008
credit card processing fees		
Recipient's name, mailing address and ZIP code Bankers Trust 453 7th St Des Moines, IA 50309	Name of recipient's employer NA Recipients's occupation NA	Amount of Expenditure \$ 11 Date of expenditure 11/30/2008
Purpose of expenditure bank service charges		
Recipient's name, mailing address and ZIP code Bankers Trust 453 7th Des Moines, IA 50309	Name of recipient's employer NA Recipients's occupation NA	Amount of Expenditure \$ 11 Date of expenditure 12/01/2008
Purpose of expenditure bank service chargers		
Recipient's name, mailing address and ZIP code Theresa Kehoe 2813 Virginia Place Des Moines, IA 50321	Name of recipient's employer NA Recipients's occupation NA	Amount of Expenditure \$ 132 Date of expenditure 12/29/2008
Purpose of expenditure compliance consultant fee		
Recipient's name, mailing address and ZIP code Bankers Trust 453 7th Des Moines, IA 50309	Name of recipient's employer NA Recipients's occupation NA	Amount of Expenditure \$ 18 Date of expenditure 12/29/2008
Purpose of expenditure bank service charges		
Recipient's name, mailing address and ZIP code American Express PO Box 53852 Phoenix, AZ 85072	Name of recipient's employer NA Recipients's occupation NA	Amount of Expenditure \$ -36 Date of expenditure 10/22/2008
Purpose of expenditure reimbursement of credit card processing fees		